United Nations A/CONF.197/MC/L.1/Add.5

Second World Assembly on Ageing
Madrid
8-12 April 2002

Distr.: Limited
12 April 2002

Original: English

Agenda item 9
Political Declaration and International Plan of Action on Ageing, 2002

Report of the Main Committee

Addendum

Draft international plan of action on ageing, 2002*

Rapporteur: Ms. Ivana **Grollová** (Czech Republic)

1. At its _____ meeting, on _____ April 2002, the Main Committee approved the following changes to the text of the draft international plan of action on ageing, 2002 and recommended them to the Assembly for adoption.

2. Paragraph 12, as contained in document A/CONF.197/3/Add.2, with the deletion of footnote 3, was agreed upon.

3. Paragraph 33 was revised to read:

> "Despite restrictions on legal international migration, migration flows have increased internationally. In developing countries and countries with economies in transition, economic support, including remittances from children abroad, is often a vital lifeline to older persons and through them to their communities and local economies. As international migrants from earlier decades grow older, some Governments are seeking to assist older migrants."

4. After paragraph 48 (e), the new actions proposed by the Group of 77 (G77) as well as the new action proposed by the European Union (EU), were deleted and replaced by the following:

> "48. (f) Enhance international cooperation to support national efforts to eradicate poverty in keeping with internationally agreed goals in order to achieve sustainable social and economic support for older persons."

* For the text of the draft international plan of action on ageing, 2002, see A/CONF.197/3/Add.2, 3 and 5.

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5. After paragraph 48 (f), a new paragraph was inserted, to read:

"48. (g) Strengthen the capacities of developing countries to address the obstacles that hinder their participation in an increasingly globalized economy in order to assist them in their efforts to eradicate poverty, in particular poverty among older persons."

6. Paragraph 67 was revised to read:

"Investing in health care and rehabilitation for older persons extends their healthy and active years. The ultimate goal is a continuum of care ranging from health promotion and disease prevention to the provision of primary health care, acute care treatment, rehabilitation, community care for chronic health problems, physical and mental rehabilitation for older persons, including older persons with disabilities, and palliative care[1] for older persons suffering painful or incurable illness or disease. Effective care for older persons needs to integrate physical, mental, social, spiritual and environmental factors."

7. Paragraph 70 (d) was revised to read:

"Implement international obligations to ensure the access of older persons to primary health care without discrimination based on age or other forms of discrimination."

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[1] The definition of palliative care, based on that of the World Health Organization (WHO), is the active total care of patients whose disease is not responsive to curative treatment, namely by controlling pain and other symptoms of the disease and offering psychological, social and spiritual support to patients and their families.